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Inpatient Progress Notes

Restraint or Seclusion Licensed Independent Practitioner (LIP) Progress Note

| Date of visit: | | | | | | |
|---|---|--|--|--|--|--|
| Time: | | | | | | |
| Seclusion or Restraints (circle one | () | | | | | |
| LIP Assessment of patient: | | | | | | |
| Response of patient to care provided: | | | | | | |
| Plan for this patient to be released: | | | | | | |
| Justification of continued need for restraints or seclusion at this time (provide additional written orders as needed): | | | | | | |
| | | | | | | |
| Notification of family members regarding use of se | eclusion or restraint: | | | | | |
| , , , | By Whom: | | | | | |
| Policy Requirement for Behavioral Health: A Licensed Independent Practitioner (LIP — MD, DDS, Physician Assistant, Nurse Practitioner) must perform a face-to-face evaluation of the patient within one hour of the implementation of restraint or seclusion. Thereafter, continued in person evaluation by an LIP must be repeated after 4 hours for children (<18 y.o.) and 8 hours for adults (≥18 y.o.) as long as criteria cannot be met for release from seclusion or restraints. Documentation of each LIP face-to-face evaluation <u>must</u> be completed using this Restraint or Seclusion LIP Progress Notes. | | | | | | |
| Policy Requirement for Medical Surgical Settin | a: A Licensed Independent Practitioner (LIP — | | | | | |
| MD, DDS, Physician Assistant, Nurse Practitioner |) must perform a face-to-face evaluation of the traints. Thereafter, continued in person evaluation g as the restraint condition continues. | | | | | |
| Seclusion LIP Progress Notes. | <u> </u> | | | | | |
| LID Circusture and Degree | Dete | | | | | |
| LIP Signature and Degree | Date | | | | | |
| Patient Identification | Inpatient Progress Notes NIH-509 (8-00) P.A. 09-25-0099 File in Section 2: Progress Notes | | | | | |